

General Assembly

Raised Bill No. 5382

February Session, 2022

LCO No. 2192



Referred to Committee on INSURANCE AND REAL ESTATE

Introduced by: (INS)

AN ACT CONCERNING THE INSURANCE HOLDING COMPANY ACT.

Be it enacted by the Senate and House of Representatives in General Assembly convened:

- 1 Section 1. Section 38a-129 of the general statutes is repealed and the
- 2 following is substituted in lieu thereof (*Effective July 1, 2022*):
- 3 (a) It shall be the purpose of sections 38a-129 to 38a-140, inclusive, to
- 4 safeguard the financial security of Connecticut domestic insurance
- 5 companies by empowering the Insurance Commissioner to supervise
- 6 the activities of insurance companies doing business within this state
- 7 which are affiliated with an insurance holding company system, to
- 8 review the acquisition of control over the management of domestic
- 9 insurance companies, however effectuated, and to provide standards
- 10 for such supervision and review.
- 11 (b) As used in sections 38a-129 to 38a-140, inclusive, the following
- 12 terms shall have the respective meanings hereinafter set forth, unless the
- 13 context shall otherwise require:
- 14 (1) "Affiliate" or "affiliated" has the same meaning as provided in

15 section 38a-1;

LCO No. 2192 **1** of 29

16 (2) "Commissioner" means the Insurance Commissioner and any 17 assistant to the Insurance Commissioner designated and authorized by 18 the commissioner while acting under such designation;

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- (3) "Control", "controlled by" or "under common control with" has the same meaning as provided in section 38a-1;
- (4) "Enterprise risk" means any activity, circumstance, event or series of events involving one or more affiliates of an insurer that, if not remedied promptly, is likely to have a material adverse effect upon the financial condition or liquidity of the insurer or the insurer's insurance holding company system as a whole, including, but not limited to, any activity, circumstance, event or series of events that would cause an insurer's risk-based capital to fall below minimum threshold levels, as described in subsection (d) of section 38a-72 or, for a health care center, in subdivision (2) of subsection (a) of section 38a-193, or would cause the insurer to be in a hazardous financial condition;
- (5) "Group capital calculation instructions" means the group capital
 calculation instructions as adopted by the NAIC and as amended by the
 NAIC from time to time in accordance with the procedures adopted by
 the NAIC;
- 35 [(5)] (6) "Insurance holding company system" means two or more affiliated persons, one or more of which is an insurance company;
- [(6)] (7) "Insurance company" or "insurer" has the same meaning as provided in section 38a-1, except that it does not include agencies, authorities or instrumentalities of the United States, its possessions and territories, the Commonwealth of Puerto Rico, the District of Columbia, or a state or political subdivision of a state;
- 42 [(7)] (8) "NAIC" means the National Association of Insurance 43 Commissioners;
- 44 (9) "NAIC liquidity stress test framework" means the NAIC 45 publication which includes a history of the NAIC's development of

LCO No. 2192 **2** of 29

- 46 regulatory liquidity stress testing, the scope criteria applicable for a
- 47 specific data year, and the liquidity stress test instructions and reporting
- 48 templates for a specific data year, such scope criteria, instructions, and
- 49 reporting template being as adopted by the NAIC and as amended by
- 50 the NAIC from time to time in accordance with the procedures adopted
- 51 by the NAIC;
- [(8)] (10) "Person" has the same meaning as provided in section 38a-
- 53 1, or any combination of persons so defined acting in concert;
- 54 (11) "Scope criteria" means the designated exposure bases along with
- 55 minimum magnitudes thereof for the specified data year used to
- 56 <u>establish a preliminary list of insurers considered scoped into the NAIC</u>
- 57 liquidity stress test framework for that data year;
- [(9)] (12) A "securityholder" of a specified person means one who
- 59 owns any security of such person, including common stock, preferred
- 60 stock, debt obligations and any other security convertible into or
- evidencing the right to acquire any of the foregoing;
- [(10)] (13) "Subsidiary" has the same meaning as provided in section
- 63 38a-1;
- [(11)] (14) "Voting security" includes any security convertible into or
- evidencing a right to acquire a voting security.
- 66 (c) The provisions of sections 38a-129 to 38a-140, inclusive, shall
- 67 apply to captive insurance companies, as defined in section 38a-91aa, as
- 68 specified in section 38a-91oo.
- 69 Sec. 2. Subsections (g) to (o), inclusive, of section 38a-135 of the
- 70 general statutes are repealed and the following is substituted in lieu
- 71 thereof (*Effective July 1, 2022*):
- 72 (g) (1) Except as provided in subdivision (2) of this subsection, the
- value of the registration of every insurer subject to registration shall
- 74 concurrently file with the registration an annual group capital
- 75 <u>calculation as directed by the lead state commissioner of the insurance</u>

LCO No. 2192 3 of 29

76 holding company system. The report shall be completed in accordance 77 with the NAIC group capital calculation instructions, which may permit 78 the lead state commissioner to allow a controlling person that is not the 79 ultimate controlling person to file the group capital calculation. The report shall be filed with the lead state commissioner of the insurance 80 holding company system as determined by the lead state commissioner 81 82 in accordance with the procedures within the Financial Analysis Handbook adopted by the NAIC. 83 84 (2) An insurance holding company system shall be exempt from filing 85 the group capital calculation if it is: 86 (A) An insurance holding company system that has only one insurer within its holding company structure, that only writes business and is 87 88 only licensed in its domestic state and assumes no business from any 89 other insurer; 90 (B) An insurance holding company system that is required to perform a group capital calculation specified by the United States Federal 91 92 Reserve Board. The lead state commissioner shall request such group 93 capital calculation from the United States Federal Reserve Board under 94 the terms of information sharing agreements in effect. If the United States Federal Reserve Board cannot share the calculation with the lead 95 96 state commissioner, the insurance holding company system shall not be 97 exempt from the group capital calculation filing; 98 (C) An insurance holding company system whose non-United States 99 group-wide supervisor is located within a reciprocal jurisdiction as 100 described in section 38a-85 that recognizes the United States regulatory 101 approach to group supervision and group capital; or (D) An insurance holding company system: 102 103 (i) That provides information to the lead state commissioner that 104 meets the requirements for accreditation under the NAIC financial

LCO No. 2192 **4** of 29

standards and accreditation program, either directly or indirectly

through the group-wide supervisor, who has determined such

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- 107 information is satisfactory to allow the lead state commissioner to 108 comply with the NAIC group supervision approach, as detailed in the NAIC Financial Analysis Handbook; and 109 110 (ii) Whose non-United States group-wide supervisor that is not in a reciprocal jurisdiction recognizes and accepts, as specified by the 111 commissioner in regulations adopted in accordance with the provisions 112 113 of chapter 54, the group capital calculation as the world-wide group capital assessment for United States insurance groups who operate in 114 115 that jurisdiction. 116 (3) Notwithstanding subparagraphs (C) and (D) of subdivision (2) of 117 this subsection, a lead state commissioner shall require the group capital calculation for the United States operations of any non-United States 118 119 based insurance holding company system where, after any necessary 120 consultation with other supervisors or officials, it is determined 121 appropriate by the lead state commissioner for prudential oversight and 122 solvency monitoring purposes or for ensuring competitiveness of the 123 insurance marketplace. 124 (4) Notwithstanding subparagraphs (A) and (D) of subdivision (2) of this subsection, the lead state commissioner shall have the discretion to 125 exempt the ultimate controlling person from filing the annual group 126 127 capital calculation or to accept a limited group capital filing or report in 128 accordance with criteria as specified by the commissioner in regulations 129 adopted in accordance with the provisions of chapter 54. 130 (5) If the lead state commissioner determines that an insurance 131 holding company system no longer meets one or more of the requirements for an exemption for filing the group capital calculation 132 under subdivision (2) of this subsection, the insurance holding company 133 134 system shall file the group capital calculation at the next annual filing 135 date unless given an extension by the lead state commissioner based on
- 138 commissioner by an insurance holding company supervised by the

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reasonable grounds shown.

LCO No. 2192 5 of 29

(6) The information reported and provided to the lead state

139 United States Federal Reserve Board or any United States group-wide 140 supervisor pursuant to this subsection, shall: 141 (A) Be confidential by law and privileged; 142 (B) Not be subject to disclosure under section 1-210; 143 (C) Not be subject to subpoena; and 144 (D) Not be subject to discovery or admissible in any civil action. 145 (7) The group capital calculation and resulting group capital ratio required pursuant to this subsection are regulatory tools for assessing 146 147 group risks and capital adequacy and are not intended as a means to rank insurers or insurance holding company systems generally. 148 149 (h) The ultimate controlling person of every insurer subject to 150 registration and also scoped into the NAIC liquidity stress test 151 framework shall file the results of a specific year's liquidity stress test to the lead state insurance commissioner of the insurance holding 152 153 company system as determined by procedures within the Financial 154 Analysis Handbook adopted by the NAIC. 155 (1) The NAIC liquidity stress test framework includes scope criteria applicable to a specific data year. These scope criteria are reviewed at 156 157 least annually by the NAIC Financial Stability Task Force or its successor. Any change to the NAIC liquidity stress test framework or to 158 the data year for which the scope criteria are to be measured shall be 159 160 effective on January first of the year following the calendar year when 161 such changes are adopted. Insurers meeting at least one threshold of the scope criteria shall be considered scoped into the NAIC liquidity stress 162 test framework for the specified data year unless the lead state 163 164 commissioner, in consultation with the NAIC Financial Stability Task Force or its successor, determines the insurer should not be scoped into 165 166 the NAIC liquidity stress test framework for that data year. Insurers that

LCO No. 2192 **6** of 29

do not trigger at least one threshold of the scope criteria shall be

considered scoped out of the NAIC liquidity stress test framework for

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- Raised Bill No. 5382 169 the specified data year, unless the lead state insurance commissioner, in 170 consultation with the NAIC Financial Stability Task Force or its 171 successor, determines the insurer should be scoped into the NAIC 172 liquidity stress test framework for that data year. (2) The performance of, and filing of the results from, a specific year's 173 liquidity stress test shall comply with the NAIC liquidity stress test 174 175 framework's instructions and reporting templates for that year and any 176 lead state insurance commissioner determinations, in conjunction with 177 the NAIC Financial Stability Task Force or its successor, provided 178 within the NAIC liquidity stress test framework. 179 (3) The information reported and provided to the lead state commissioner by an insurance holding company supervised by the 180 181 United States Federal Reserve Board and non-United States group-wide 182 supervisor pursuant to this subsection, shall: 183 (A) Be confidential by law and privileged; 184 (B) Not be subject to disclosure under section 1-210; 185 (C) Not be subject to subpoena; and
- (D) Not be subject to discovery or admissible in any civil action.
- (4) The liquidity stress test along with its results and supporting disclosures required pursuant to this subsection are regulatory tools for assessing group liquidity risks and are not intended as a means to rank insurers or insurance holding company systems generally.
- [(g)] (i) The commissioner shall terminate the registration of any insurance company that demonstrates that it no longer is a member of an insurance holding company system.
- [(h)] (j) The commissioner may require or allow two or more affiliated insurance companies subject to registration hereunder to file a consolidated registration statement.

LCO No. 2192 **7** of 29

[(i)] (k) The commissioner may allow an insurance company that is authorized to do business in this state and is part of an insurance holding company system to register on behalf of any affiliated insurer that is required to register under subsection (a) of this section and to file all information and materials required to be filed under this section.

[(j)] (1) Any person may file with the commissioner a disclaimer of affiliation with any insurance company and any insurance company may file a disclaimer of affiliation with any other person. The disclaimer shall fully disclose all material relationships and bases for affiliation between such person and such insurance company as well as the basis for disclaiming such affiliation. After a disclaimer has been filed, the insurance company shall be relieved of any duty to register or report under this section that may arise out of the insurance company's relationship with such person unless the commissioner disallows such disclaimer. The commissioner shall disallow such disclaimer only after furnishing all parties in interest with notice and an opportunity to be heard, and after making specific findings of fact to support such disallowance.

[(k)] (m) The failure to file a registration statement or any amendment, addition thereto or summary or an enterprise risk report required by this section within the time specified for such filing shall be a violation of sections 38a-129 to 38a-140, inclusive, as amended by this act.

[(l)] (n) The commissioner may by regulation or order exempt any insurance company or class of insurance companies from registration under this section if, in the commissioner's judgment, registration by such company or class of companies is not necessary to effectuate the purposes of said sections.

[(m)] (o) A foreign or alien insurer shall not be required to register pursuant to this section if it is (1) subject to disclosure requirements and standards adopted by statute or regulation in the jurisdiction of its domicile that are substantially similar to those contained in this section

LCO No. 2192 8 of 29

and subsections (a), (b), (f) and (g) of section 38a-136, as amended by this act, or (2) admitted in the domiciliary jurisdiction of the principal insurer in its holding company system and in said jurisdiction is subject to disclosure requirements and standards adopted by statute or regulation that are substantially similar to those contained in this section and subsections (a), (b), (f) and (g) of section 38a-136, as amended by this act. The commissioner may require any authorized insurer that is a member of a holding company system not subject to registration under this section to furnish a copy of the registration statement or other information filed by such insurance company with the insurance regulatory authority of its domicile or the domicile of the principal insurer in its holding company system, as the case may be.

[(n)] (p) (1) To assess the business strategy, financial, legal or regulatory position risk exposure, risk management or governance processes of a domestic insurance company registered under this section that is part of an insurance holding company system that has international operations, and as part of the examination pursuant to section 38a-14a of such insurance company, the commissioner may initiate, be a member of or participate in a supervisory college, which shall be a temporary or permanent forum for communication between and cooperation among state, federal and international regulatory officials.

(2) If the commissioner initiates a supervisory college, the commissioner shall (A) establish the membership of, and participation by state, federal or international regulatory officials in, such supervisory college, (B) establish the functions of the supervisory college and the role of members and participants, and select a chairperson for such supervisory college, (C) coordinate the activities of the supervisory college, including meeting planning and processes for information sharing that comply with the applicable confidentiality provisions set forth in section 38a-137, as amended by this act, and (D) establish a crisis management plan for such supervisory college.

(3) The commissioner may enter into written agreements with state,

LCO No. 2192 **9** of 29

federal or international regulatory officials for the governing of the activities of a supervisory college. Any such agreements shall maintain the confidentiality requirements under section 38a-137, as amended by this act.

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- (4) Each insurance company subject to registration under this section shall be assessed for and shall pay to the commissioner its share of the reasonable costs, including reasonable travel expenses, of the commissioner's participation in a supervisory college. Such payment shall be in addition to any other taxes, fees and moneys otherwise payable to the state. The commissioner shall establish the assessment method for such costs and provide reasonable notice to each insurance company subject to any such assessment.
- (5) Nothing in this subsection shall be construed to limit the authority of the commissioner to regulate an insurance company or its affiliate under the commissioner's jurisdiction or to delegate any regulatory authority of the commissioner to a supervisory college.
- [(o)] (q) (1) As used in this subsection: (A) "Group-wide supervisor" means the regulatory official (i) authorized by such official's jurisdiction to conduct and coordinate group-wide supervisory activities, and (ii) who is determined or acknowledged to be the group-wide supervisor of an internationally active insurance group pursuant to this subsection; and (B) "internationally active insurance group" means any insurance holding company system that (i) includes an insurance company registered pursuant to this section, and (ii) meets the following criteria: (I) Premiums are written in at least three countries; (II) the percentage of gross premiums written, including, for purposes of this subsection, administrative service fees, associated expenses and claims payments, without the United States is at least ten per cent of the insurance holding company system's total gross written premiums; and (III) based on a three-year rolling average, the total assets of the insurance holding company system are at least fifty billion dollars or the total gross written premiums of the insurance holding company system are at least ten billion dollars.

LCO No. 2192 **10** of 29

(2) (A) The commissioner, in cooperation with other state, federal and international regulatory agencies of the jurisdictions where members of the internationally active insurance group are domiciled, shall determine a single group-wide supervisor for an internationally active insurance group. An insurance holding company system that does not qualify as an internationally active insurance group may request that the commissioner make a determination or acknowledgment of a group-wide supervisor as set forth in this subsection.

- (B) The commissioner may determine that the commissioner is the appropriate group-wide supervisor for an internationally active insurance group that conducts substantial insurance business operations in this state and may act as a group-wide supervisor for any internationally active insurance group in accordance with the provisions of this subsection.
- (C) The commissioner may acknowledge that the regulatory official of another jurisdiction is an appropriate group-wide supervisor for an internationally active insurance group that (i) does not conduct substantial insurance business operations in the United States, (ii) conducts substantial insurance business operations in the United States but not in this state, or (iii) conducts substantial insurance business operations in the United States and in this state but the commissioner has determined, pursuant to the factors set forth in subdivision (3) of this subsection, that the regulatory official of another jurisdiction is the appropriate group-wide supervisor.
- (D) When another regulatory official is acting as the group-wide supervisor of an internationally active insurance group, the commissioner shall acknowledge such official as the group-wide supervisor, except that the commissioner shall make a determination or acknowledgment of a group-wide supervisor for such insurance group if a material change in such insurance group results in (i) the largest share of such insurance group's premiums, assets or liabilities being held by member insurance companies domiciled in this state, or (ii) this state being the place of domicile of the top-tiered insurance company or

LCO No. 2192 11 of 29

companies in such insurance group.

- (E) A regulatory official determined or acknowledged to be a group-wide supervisor of an internationally active insurance group may determine, after considering the factors set forth in subdivision (3) of this subsection, that it is appropriate to acknowledge another regulatory official to serve as the group-wide supervisor of such insurance group. Such acknowledgment shall be made (i) in cooperation with and subject to the acknowledgment of other regulatory officials of the jurisdictions where members of such insurance group are domiciled, and (ii) in consultation with such insurance group.
- 338 (3) The commissioner shall consider the following factors in making 339 a determination or acknowledgment under subdivision (2) of this 340 subsection:
 - (A) The place of domicile of the member insurance companies of the internationally active insurance group that holds the largest share of such insurance group's premiums, assets or liabilities;
- 344 (B) The place of domicile of the top-tiered insurance company or 345 companies in the internationally active insurance group;
 - (C) The locations of the executive offices or the largest operational offices of the internationally active insurance group; and
 - (D) Whether (i) a regulatory official of another jurisdiction is acting or seeking to act as the group-wide supervisor under a regulatory system the commissioner determines to be substantially similar to that provided under the laws of this state or is otherwise sufficient in terms of group-wide supervision, enterprise risk analysis and cooperation with other regulatory officials, and (ii) such regulatory official acting or seeking to act as the group-wide supervisor provides the commissioner with reasonably reciprocal recognition and cooperation.
 - (4) The commissioner may collect, pursuant to section 38a-14a, from any insurance company registered pursuant to this section any

LCO No. 2192 12 of 29

information necessary for the commissioner to determine whether the commissioner may act as the group-wide supervisor of an internationally active insurance group of which such company is a member or whether the commissioner may acknowledge that a regulatory official of another jurisdiction should act as the group-wide supervisor of such insurance group.

- (5) Prior to issuing any determination or acknowledgment under this subsection, the commissioner shall notify the member insurance company registered pursuant to this section and the ultimate controlling person of the internationally active insurance group of such pending determination or acknowledgment. The commissioner shall provide the internationally active insurance group at least thirty calendar days to submit any additional information pertinent to such determination or acknowledgment that is requested by the commissioner or that such insurance group chooses to submit. The commissioner shall publish in the Connecticut Law Journal and post on the Insurance Department's Internet web site a current list of internationally active insurance groups that the commissioner has determined are subject to group-wide supervision by the commissioner.
- (6) The commissioner may conduct and coordinate the following group-wide supervision activities for an internationally active insurance group for which the commissioner is determined to be the group-wide supervisor:
- (A) Assess the enterprise risks within the internationally active insurance group to ensure that material financial conditions of and liquidity risks to the members of such insurance group that are engaged in the business of insurance are identified by management and that reasonable and effective mitigation measures are in place;
- (B) Request from members of such insurance group information necessary and appropriate to assess enterprise risk, including, but not limited to, information about governance, risk assessment and management, capital adequacy and material intercompany transactions;

LCO No. 2192 13 of 29

(C) Coordinate and, through the authority of the regulatory officials of the jurisdictions where members of the internationally active insurance group are domiciled, compel the development and implementation of reasonable measures designed to ensure the internationally active insurance group is able to timely recognize and mitigate material enterprise risks to the members of such insurance group that are engaged in the business of insurance;

- (D) Communicate with other state, federal and international regulatory agencies of the jurisdictions where members of the internationally active insurance group are domiciled and share relevant information, subject to the confidentiality provisions of section 38a-137, as amended by this act, through a supervisory college, as set forth in subsection [(n)] (p) of this section;
 - (E) Enter into agreements with or obtain documentation from any member insurance company registered under this section, any other member of the internationally active insurance group and any other state, federal and international regulatory agencies of the jurisdictions where members of the internationally active insurance group are domiciled, to establish or clarify the commissioner's role as group-wide supervisor and that may include provisions for resolving disputes with other regulatory officials. No such agreement or documentation shall serve as evidence that an insurance company or person within an insurance company holding system that is not domiciled or incorporated in this state is doing business in this state or is otherwise subject to the jurisdiction of this state; and
 - (F) Other activities necessary to effectuate the group-wide supervisory purposes of this section and sections 38a-129 to 38a-140, inclusive, <u>as amended by this act</u>, and within the authority granted in said sections.
 - (7) If the commissioner acknowledges that a regulatory official of a jurisdiction not accredited by NAIC is the group-wide supervisor of an internationally active insurance group, the commissioner shall

LCO No. 2192 14 of 29

reasonably cooperate through a supervisory college or otherwise with group supervision undertaken by such group-wide supervisor, provided such cooperation is in compliance with the laws of this state and such group-wide supervisor recognizes and cooperates with the commissioner's activities as a group-wide supervisor for other internationally active insurance groups, where applicable. The commissioner may refuse to cooperate if the commissioner determines such recognition and cooperation are not reasonably reciprocated. The commissioner may enter into agreements with or obtain documentation from any member insurance company registered pursuant to this section, any affiliate of such insurance company and any other state, federal and international regulatory agencies of the jurisdictions where members of the internationally active insurance group are domiciled, to establish or clarify such official's role as group-wide supervisor.

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- 436 (8) The commissioner may adopt regulations, in accordance with the 437 provisions of chapter 54, to carry out the provisions of this subsection.
 - (9) Each insurance company registered pursuant to this section shall be liable for and shall pay the reasonable expenses of the commissioner's administration of this subsection, including the engagement of the services of attorneys, actuaries and other professionals and all reasonable travel expenses.
- Sec. 3. Section 38a-136 of the general statutes is repealed and the following is substituted in lieu thereof (*Effective July 1, 2022*):
- (a) Transactions within an insurance holding company system to which an insurance company subject to registration under section 38a-135, as amended by this act, is a party shall be subject to the following requirements:
- (1) The terms shall be fair and reasonable;
- 450 (2) [charges] <u>Charges</u> or fees for services performed shall be 451 reasonable;

LCO No. 2192 15 of 29

(3) [expenses] <u>Expenses</u> incurred and payment received shall be allocated to the insurance company in conformity with customary insurance accounting practices consistently applied;

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- (4) [the] <u>The</u> books, accounts and records of each party shall be so maintained as to clearly and accurately disclose the precise nature and details of the transactions, including such accounting information as is necessary to support the reasonableness of the charges or fees to the respective parties;
- (5) [the] <u>The</u> insurance company's surplus shall be reasonable in relation to such company's outstanding liabilities and adequate to its financial needs; [and]
 - (6) [agreements] Agreements for cost-sharing services and management shall include such provisions as may be required by regulations adopted by the commissioner; [.]
 - (7) If an insurance company subject to sections 38a-129 to 38a-140, inclusive, as amended by this act, is determined by the commissioner to be in a hazardous financial condition as set forth in sections 38a-8-101 to 38a-8-104, inclusive, of the regulations of Connecticut state agencies or a condition that would be grounds for supervision, conservation or a delinquency proceeding as set forth in chapter 704c, the commissioner may require the insurance company to secure and maintain either a deposit, held by the commissioner, or a bond, as determined by the insurance company at the insurance company's discretion, for the protection of the insurance company for the duration of the contracts or agreements, or the existence of the condition for which the commissioner required the deposit or the bond. In determining whether the bond is required, the commissioner shall consider whether concerns exist with respect to affiliates of the insurance company to fulfill the contracts or agreements if the insurance company were to be put into liquidation. Once the insurance company is determined to be in a hazardous financial condition or a condition that would be grounds for supervision, conservation or a delinquency proceeding, and a deposit

LCO No. 2192 **16** of 29

or bond is necessary, the commissioner may determine the amount of the deposit or bond, not to exceed the value of the contracts or agreements in any one year, and whether such deposit or bond shall be required for a single contract, multiple contracts or a contract only with a specific affiliate of the insurance company;

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(8) All records and data of the insurance company held by an affiliate shall remain the property of the insurance company and shall be subject to control of the insurance company, identifiable, and segregated or readily capable of segregation, at no additional cost to the insurance company, from all other persons' records and data, including, but not limited to, all records and data that are otherwise the property of the insurance company, in whatever form maintained, including, but not limited to, claims and claim files, policyholder lists, application files, litigation files, premium records, rate books, underwriting manuals, personnel records, financial records or similar records within the possession, custody or control of the affiliate. At the request of the insurance company, the affiliate shall provide that the receiver can obtain a complete set of all records of any type that pertain to the insurance company's business; obtain access to the operating systems on which the data is maintained; obtain the software that runs such systems either through assumption of licensing agreements or otherwise; and restrict the use of the data by the affiliate if it is not operating the insurance company's business. The affiliate shall provide a waiver of any landlord lien or other encumbrance to give the insurance company access to all records and data in the event of the affiliate's default under a lease or other agreement; and

(9) Premiums or other funds that belong to the insurance company that are collected by or held by an affiliate are the exclusive property of the insurance company and shall be subject to the control of the insurance company. Any right of offset in the event an insurance company is placed into receivership shall be subject to chapter 704c.

(b) (1) The following transactions involving a domestic insurance company and any person in its holding company system, including

LCO No. 2192 **17** of 29

amendments to or modifications of affiliate agreements previously filed pursuant to this section and that are subject to any materiality standards specified in subparagraphs (A) to (G), inclusive, of this subdivision, may not be entered into unless the insurance company has notified the commissioner in writing of its intention to enter into such transaction at least thirty days prior thereto, or such shorter period as the commissioner may permit, and the commissioner has approved or not disapproved it within such period. The written notice for such amendments or modifications shall specify the reasons for the change and the financial impact on the domestic insurance company. Not later than thirty days after the termination of a previously filed agreement, the domestic insurance company shall notify the commissioner of such termination for the commissioner's determination of what written notice or filing shall be required, if any:

- (A) Sales, purchases, exchanges, loans or extensions of credit, or investments, provided such transactions are equal to or exceed: (i) With respect to nonlife insurance companies, the lesser of three per cent of the insurance company's admitted assets or twenty-five per cent of surplus; or (ii) with respect to life insurance companies, three per cent of the insurance company's admitted assets; each as of the thirty-first day of December next preceding;
- (B) Loans or extensions of credit to any person who is not an affiliate, where the insurance company makes such loans or extensions of credit with the agreement or understanding that the proceeds of such transactions, in whole or in substantial part, are to be used to make loans or extensions of credit to, to purchase assets of, or to make investments in, any affiliate of the insurance company making such loans or extensions of credit, provided such transactions are equal to or exceed: (i) With respect to nonlife insurance companies, the lesser of three per cent of the insurance company's admitted assets or twenty-five per cent of surplus; or (ii) with respect to life insurance companies, three per cent of the insurance company's admitted assets; each as of the thirty-first day of December next preceding;

LCO No. 2192 18 of 29

(C) Reinsurance agreements or modifications thereto, including (i) all reinsurance pooling agreements, and (ii) agreements in which the reinsurance premium or a change in the insurance company's liabilities, or the projected reinsurance premium or a projected change in the insurance company's liabilities in any of the next three years, equals or exceeds five per cent of the insurance company's surplus, as of the thirty-first day of December next preceding, including those agreements that may require as consideration the transfer of assets from an insurance company to a nonaffiliate, if an agreement or understanding exists between the insurance company and nonaffiliate that any portion of such assets will be transferred to one or more affiliates of the insurance company;

- (D) All management agreements, service contracts, tax allocation agreements and cost-sharing arrangements;
- (E) Guarantees by a domestic insurance company, except that a guarantee that is (i) quantifiable as to amount, and (ii) does not exceed the lesser of one-half of one per cent of the insurance company's admitted assets or ten per cent of surplus with regard to policyholders, as of the thirty-first day of December next preceding, shall not be subject to the notice requirement of this subsection;
- (F) Direct or indirect acquisitions or investments in a person that controls the domestic insurance company or in an affiliate of the insurance company in an amount that, together with the insurance company's present holdings in such investments, exceeds two and one-half per cent of the insurance company's surplus with regard to policyholders. This subsection shall not apply to direct or indirect acquisitions of or investments in (i) subsidiaries acquired pursuant to section 38a-102d or authorized pursuant to any section of this title other than sections 38a-129 to 38a-140, inclusive, as amended by this act, or (ii) nonsubsidiary affiliates that are subject to the provisions of sections 38a-129 to 38a-140, inclusive, as amended by this act; and
 - (G) Any material transactions, specified by regulation, that the

LCO No. 2192 19 of 29

commissioner determines may adversely affect the interests of the insurance company's policyholders.

- (2) Nothing contained in this section shall be deemed to authorize or permit any transactions that, in the case of an insurance company not a member of the same insurance holding company system, would be otherwise contrary to law.
- (c) A domestic insurance company may not enter into transactions that are part of a plan or series of like transactions with persons within the insurance holding company system if the purpose of those separate transactions is to avoid the statutory threshold amount and thus avoid the review that would otherwise occur. If the commissioner determines that such separate transactions were entered into over any twelvementh period for such purpose, the commissioner may exercise authority under section 38a-140.
- (d) The commissioner, in reviewing transactions pursuant to subsection (b) of this section, shall consider whether the transactions comply with the standards set forth in subsection (a) of this section and whether they may adversely affect the interests of policyholders.
- (e) Except as may be exempted pursuant to regulations adopted, in accordance with the provisions of chapter 54, by the commissioner or otherwise waived by the commissioner, the commissioner shall be notified not later than thirty days after any material investment of the domestic insurance company in any one corporation if the total investment in such corporation by such insurance company's insurance holding company system exceeds ten per cent of such corporation's voting securities.
- (f) (1) No insurance company subject to registration under section 38a-135, as amended by this act, shall pay any extraordinary dividend or make any other extraordinary distribution to its stockholders until the commissioner has approved such payment or until thirty days after the commissioner has received notice from such company of the declaration thereof within which period the commissioner has not

LCO No. 2192 **20** of 29

disapproved such payment, whichever is sooner. For the purposes of this subsection, an extraordinary dividend or distribution is any dividend or distribution of cash or other property, whose fair market value together with that of other dividends or distributions made within the preceding twelve months, exceeds the greater of (A) ten per cent of such insurance company's surplus as of the thirty-first day of December last preceding, or (B) the net gain from operations of such insurance company, if such company is a life insurance company, or the net income, if such company is not a life insurance company, for the twelvemonth period ending the thirty-first day of December last preceding, but shall not include pro rata distributions of any class of the insurance company's own securities.

- (2) Notwithstanding any other provision of law, an insurance company may declare an extraordinary dividend or distribution that is conditional upon the commissioner's approval thereof, but such a declaration shall confer no rights upon stockholders until (A) the commissioner has approved the payment of such dividend or distribution, or (B) until thirty days after such declaration thereof within which period the commissioner has not disapproved such declaration, whichever is sooner.
- (g) For purposes of sections 38a-129 to 38a-140, inclusive, <u>as amended by this act</u>, in determining whether an insurance company's surplus is reasonable in relation to the insurance company's outstanding liabilities and adequate to its financial needs, the following factors, in addition to others, shall be considered: (1) The size of the insurance company as measured by its assets, capital and surplus, reserves, premium writings, insurance in force and other appropriate criteria; (2) the extent to which the insurance company's business is diversified among the several lines of insurance; (3) the number and size of risks insured in each line of business; (4) the nature of the geographical dispersion of the insurance company's insured risks; (5) the nature and extent of the insurance company's reinsurance program; (6) the quality, diversification and liquidity of the insurance company's investment portfolio; (7) the recent past and projected future trend in the size of the insurance company's

LCO No. 2192 **21** of 29

surplus; (8) the surplus maintained by other comparable insurance companies; (9) the adequacy of the insurance company's reserves; (10) the quality of the company's earnings and the extent to which the reported earnings include extraordinary items; and (11) the quality and liquidity of investments in affiliates. The commissioner may discount any such investment or treat any such investment as a disallowed asset for purposes of determining the adequacy of surplus whenever, in the commissioner's judgment, such investment warrants.

- (h) (1) Any domestic insurance company that is affiliated with an insurance holding company system shall report for informational purposes to the Insurance Commissioner all dividends and other distributions to securityholders, not later than five business days after the declaration and at least ten days, commencing from the date of receipt by the Insurance Department, prior to payment thereof.
- (2) No dividend or other distribution may be paid when the surplus of the insurance company is less than the surplus required by section 38a-72 for the kind or kinds of business authorized to be transacted by such company, nor when the payment of a dividend or other distribution would reduce its surplus to less than such amount.
- (3) Except as otherwise provided by law, no dividend or other distribution exceeding an amount equal to an insurance company's earned surplus may be paid without the Insurance Commissioner's prior approval. For purposes of this subsection, "earned surplus" means "unassigned funds-surplus", as defined in the annual report of the insurance company that was most recently submitted pursuant to section 38a-53, reduced by twenty-five per cent of unrealized appreciation in value or revaluation of assets or unrealized profits on investments, as defined in such report.
- (i) (1) The commissioner may require a domestic insurance company of which control has been acquired pursuant to section 38a-130 to submit to a financial examination and a market conduct examination within thirty days after such acquisition in accordance with procedures

LCO No. 2192 **22** of 29

set forth by NAIC's examiner's handbook and such regulations as the commissioner may adopt.

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(2) No domestic insurance company of which control has been acquired pursuant to section 38a-130 shall, without the prior approval of the commissioner: (A) Pay or propose to pay any dividend during the period of two years from the date of acquisition of control of such insurance company; (B) acquire or enter into an agreement or understanding to acquire control, during the period of three years after the date of acquisition of control of such insurance company, of any other person or persons whose assets exceed twenty-five million dollars; (C) provide or propose to provide directly or indirectly, during the period of three years after the date of acquisition of control of such insurance company, any loans, advances, guarantees, pledges or other financial assistance; or (D) engage in any material transaction with any person during the period of three years after the date of acquisition of such insurance company. For purposes of this subsection, a "material transaction" shall include, but not be limited to, any transfer or encumbrance of assets not in the ordinary course of business that, together with all other transfers or encumbrances made within the preceding twelve months, exceeds in value the greater of (i) ten per cent of such insurance company's surplus as of the December thirty-first last preceding, or (ii) the net gain from operations of such insurance company, if such company is a life insurance company, or the net investment income of such company, if such company is not a life insurance company, for the twelve-month period ending the December thirty-first last preceding.

(3) The commissioner shall, upon a written request from the controlled domestic insurance company and, upon public hearing after notice to all interested parties, determine whether any limitations contained in subdivision (2) of this subsection shall be continued, or whether and on what conditions they may be waived. Such determination shall be predicated on the results of the examinations under subdivision (1) of this subsection and such further examinations, if any, the commissioner may require concerning the adequacy of the

LCO No. 2192 **23** of 29

- insurance company's reserves, the effect any proposed transaction will
- 715 have on the insurance company's surplus, its cash flow needs and its
- 716 ability to satisfy any reasonably anticipated obligations in the
- foreseeable future, and any other effect the proposed transaction would
- 718 have on the financial stability or solvency of the insurance company and
- 719 the quality and liquidity of its assets. All fees and expenses relating to
- such examinations shall be paid by the insurance company.
- 721 (4) Nothing in this subsection shall be interpreted to prohibit any 722 transactions between a domestic insurance company and any of its
- subsidiaries in the ordinary course of business.
- 724 (j) (1) Any affiliate that is a party to an agreement or contract with a
- 725 domestic insurance company that is subject to subparagraph (D) of
- subdivision (1) of subsection (b) of this section shall be subject to the
- 727 jurisdiction of any order of rehabilitation or liquidation against the
- 728 insurance company and to the authority of any rehabilitator or
- 729 <u>liquidator for the insurance company appointed pursuant to chapter</u>
- 730 <u>704c, for the purpose of interpreting, enforcing and overseeing the</u>
- 731 affiliate's obligations under the agreements or contracts to perform
- 732 services for the insurance company that:
- (A) Are an integral part of the insurance company's operations,
- 734 <u>including</u>, but not limited to, management, administration, accounting,
- data processing, marketing, underwriting, claims handling, investment
- or any other similar functions; or
- 737 (B) Are essential to the insurance company's ability to fulfill its
- 738 <u>obligations under insurance policies.</u>
- 739 (2) The commissioner may require that an agreement or contract
- 740 pursuant to subparagraph (D) of subdivision (1) of subsection (b) of this
- section for provisions or services set forth in subparagraphs (A) and (B)
- of subdivision (1) of this subsection specify that the affiliate consents to
- 743 the jurisdiction described in subdivision (1) of this subsection.
- Sec. 4. Section 38a-137 of the general statutes is repealed and the

LCO No. 2192 **24** of 29

745 following is substituted in lieu thereof (*Effective July 1, 2022*):

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- (a) All information, documents, materials and copies thereof obtained by or disclosed to the commissioner or any other person in the course of an examination or investigation made pursuant to section 38a-14a and all information reported, furnished or filed pursuant to sections 38a-131, 38a-135, as amended by this act, and 38a-136, as amended by this act, shall (1) be confidential by law and privileged, (2) not be subject to disclosure under section 1-210, (3) not be subject to subpoena, and (4) not be subject to discovery or admissible in evidence in any civil action. The commissioner shall not make such information, documents, materials or copies public without the prior written consent of the insurance company to which it pertains unless the commissioner, after giving the insurance company and its affiliates who would be affected thereby notice and opportunity to be heard, determines that the interests of policyholders, securityholders or the public will be served by the publication thereof, in which event the commissioner may publish all or any part thereof in such manner as the commissioner may deem appropriate. The commissioner may use such information, documents, materials or copies in the furtherance of any regulatory or legal action brought as part of the commissioner's official duties.
- (b) Neither the commissioner nor any person who receives information, documents, materials or copies as set forth in subsection (a) of this section or with whom such information, documents, materials or copies are shared, while acting under the authority of the commissioner, shall testify or be required to testify in any civil action concerning such information, documents, materials or copies.
- (c) Except as specified in subdivision (2) of subsection (f) of section 38a-135, <u>as amended by this act</u>, to assist the commissioner in the performance of the commissioner's duties, the commissioner:
- (1) May share information, documents, materials or copies thereof, including information, documents, materials or copies deemed confidential and privileged pursuant to subsection (a) of this section,

LCO No. 2192 **25** of 29

with (A) other state, federal and international regulatory officials, (B) the NAIC [or its affiliate or subsidiaries] and any third-party consultants designated by the commissioner, (C) the International Association of Insurance Supervisors, (D) the Bank for International Settlements, (E) the Federal Insurance Office, (F) state, federal and international law enforcement authorities, and (G) members or participants of a supervisory college, as described in subsection [(n)] (p) of section 38a-135, as amended by this act, of which the commissioner is a member or a participant, provided the recipient of any such information, documents, materials or copies agrees, in writing, to maintain the confidentiality and privileged status of such information, documents, materials and copies, and has verified, in writing, the recipient's legal authority to maintain confidentiality;

(2) May receive information, documents, materials or copies thereof, including confidential and privileged information, documents, materials or copies, from the NAIC [or its affiliates or subsidiaries] and any third-party consultants designated by the commissioner, the International Association of Insurance Supervisors, the Bank for International Settlements, the Federal Insurance Office, or state, federal and international law enforcement authorities. The commissioner shall maintain as confidential and privileged any information, documents, materials or copies received with notice or the understanding that such information, documents, materials or copies are confidential and privileged under the laws of the jurisdiction that is the source of such information, documents, materials or copies; and

(3) Shall enter into written agreements consistent with this subsection with the NAIC and any third-party consultants designated by the commissioner, and may enter into written agreements consistent with this subsection with the International Association of Insurance Supervisors or the Bank for International Settlements, governing the sharing and use of information, documents, materials or copies thereof shared or received pursuant to sections 38a-129 to 38a-140, inclusive, as amended by this act. Any such agreement consistent with this subsection shall (A) specify the procedures and protocols regarding the

LCO No. 2192 **26** of 29

811 confidentiality and security of information shared (i) with the NAIC [or 812 its affiliates or subsidiaries] or a third-party consultant designated by 813 the commissioner, the International Association of Insurance Supervisors or the Bank for International Settlements pursuant to 814 815 sections 38a-129 to 38a-140, inclusive, as amended by this act, and (ii) by the NAIC [or its affiliates or subsidiaries] or a third-party consultant 816 817 designated by the commissioner, the International Association of Insurance Supervisors or the Bank for International Settlements with 818 819 other state, federal or international regulatory officials, (B) provide that 820 the recipient agrees in writing to maintain the confidentiality and 821 privileged status of the documents, materials or other information and 822 has verified in writing the recipient's legal authority to maintain such confidentiality or privilege, (C) specify that the commissioner shall 823 824 retain ownership of such information and that the use of such 825 information by the NAIC [or its affiliates or subsidiaries] or a third-party 826 consultant, the International Association of Insurance Supervisors or the 827 Bank for International Settlements is subject to the commissioner's 828 discretion, [(C)] (D) excluding documents, material or information 829 reported pursuant to subsection (h) of section 38a-135, as amended by 830 this act, prohibit the NAIC or third-party consultant designated by the commissioner from storing such information shared pursuant to 831 832 sections 38a-129 to 38a-140, inclusive, as amended by this act, in a 833 permanent database after the underlying analysis is completed, (E) 834 require prompt notice to be given to an insurance company whose 835 confidential information is in the possession of the NAIC or [its affiliates 836 subsidiaries] a third-party consultant designated by the 837 commissioner, the International Association of Insurance Supervisors or 838 the Bank for International Settlements, if the NAIC or [its affiliates or 839 subsidiaries] a third-party consultant designated by the commissioner, 840 the International Association of Insurance Supervisors or the Bank for 841 International Settlements is subject to a request or subpoena for 842 disclosure or production of such information, [and (D)] (F) require the 843 NAIC or [its affiliates or subsidiaries] a third-party consultant 844 designated by the commissioner, the International Association of 845 Insurance Supervisors or the Bank for International Settlements, if any

LCO No. 2192 **27** of 29

said entity [or such affiliate or subsidiary] is subject to disclosure of an insurance company's confidential information that has been shared with said entity, [or such affiliate or subsidiary,] to allow such insurance company to intervene in any judicial or administrative action regarding such disclosure or information, and (G) for documents, material or information reported pursuant to subsection (h) of section 38a-135, as amended by this act, in the case of an agreement involving a third-party consultant, provide for notification of the identity of the consultant to the applicable insurer.

- (d) No waiver of any applicable privilege or claim of confidentiality in any information, documents, materials or copies thereof shall occur as a result of disclosure to the commissioner or of sharing in accordance with this section. Nothing in this section shall be construed to delegate any regulatory authority of the commissioner to any person or entity with which any information, documents, materials or copies thereof have been shared.
- (e) Any information, documents, materials or copies thereof in the possession of the NAIC or [its affiliates or subsidiaries] a third-party consultant designated by the commissioner, the International Association of Insurance Supervisors or the Bank for International Settlements pursuant to this section shall be confidential by law and privileged and shall not be subject to discovery or admissible in evidence in any civil action in this state.

This act shall take effect as follows and shall amend the following sections:		
Section 1	July 1, 2022	38a-129
Sec. 2	July 1, 2022	38a-135(g) to (o)
Sec. 3	July 1, 2022	38a-136
Sec. 4	July 1, 2022	38a-137

LCO No. 2192 **28** of 29

Statement of Purpose:

To adopt the most recent amendments made by the National Association of Insurance Commissioners to the Model Insurance Holding Company Act regarding group capital calculation.

[Proposed deletions are enclosed in brackets. Proposed additions are indicated by underline, except that when the entire text of a bill or resolution or a section of a bill or resolution is new, it is not underlined.]

LCO No. 2192 **29** of 29